



Mr. Charley W. Langer
Environmental Specialist III
Site Assessment and Mitigation
Environmental Management Department
Sacramento County
8475 Jackson Road, Suite 240
Sacramento, California 95826

June 07, 2006

RE: Monitoring Well Destruction Report - Sacramento Co LRP Site #C327, Former
Cheaper! #142, 809 20th Street, Sacramento CA

Dear Mr. Langer;

This letter documents the implementation of the April 05, 2006 workplan to destroy (abandon) six groundwater monitoring wells at the former Cheaper! Store #168 (now More For Less #21) located at 940 Petrified Forest Road in Calistoga is submitted in response to the February 15, 2006 letter to Mr. Bob Matthews of More For Less.

Well destruction permits were obtained from Sacramento County Environmental Management Department by the licensed drilling contractor: V & W Drilling of Isleton, California (CA C-57 720904), Attachment A. A City of Sacramento Encroachment was also obtained Attachment A.

V & W Drilling pressure grouted each of the seven monitoring wells and drilled out the shallowest five feet of each monitoring well:

	PVC diameter	Original Total depth
MW-1	2-inch	32.29
MW-2	2-inch	32.30
MW-3	4-inch	31.49
MW-4	2-inch	30.52
MW-5	2-inch	30.22
MW-6	2-inch	28.00
MW-7	2-inch	28.956

A DWR form 188 was filled in and filed for the combined monitoring well destructions (Attachment B).

Mr. Charley W. Langer
June 07, 2006
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Please do not hesitate to email h2ogeol@comcast.net or call the undersigned at 925-373-9211 should you have any questions.

Sincerely,

A handwritten signature in black ink, appearing to read "Gary D. Lowe". A diagonal watermark reading "DIGITAL COPY" is visible across the signature.

Gary D. Lowe, P.G. (3768), C.E.G. (1559), C.HG. (127)
Principal, Hydrogeologist
H₂OGEOL A GroundWater Consultancy



P. O. Box 2165 ■ Livermore, California 94551-2165 ■ (925) 373-9211

ATTACHMENT A

SACRAMENTO COUNTY WELL DESTRUCTION PERMIT

CITY OF SACRAMENTO ENCROACHMENT PERMIT

CALL FOR INSPECTIONS
EH (916) 875-8422
HAZMAT (916) 875-8464

WELL APPLICATION AND PERMIT FORM

**Expedite*
ENVIRONMENTAL MANAGEMENT DEPARTMENT
8475 JACKSON ROAD, SUITE 230/240
SACRAMENTO, CA 95826-3904

FOR OFFICE USE ONLY

☐ DISAPPROVED ☒ APPROVED
☐ APPROVED WITH CONDITIONS (See attachment)
By: SBN Date: 4/26/06 Date Received: 4-26-06 Permit Number: 28711
Grout Inspection By: _____ Date: _____ Date Issued: _____ SR Number: _____
Actual Well Depth: _____ Actual Grout Depth: _____ Total Fee: \$326 + \$176 Receipt Number: 153655
Depth to first Water: _____ GPS #: _____ Site Number: _____
Final Inspection By: _____ Date: _____
Well Destruction Inspection By: _____ Date: _____
Comments: _____

Inspecting Division: ☒ ENVIRONMENTAL HEALTH

☐ HAZARDOUS MATERIALS

SITE ADDRESS: 809 20th Street City: Sacramento Zip: 95814
Nearest Major Cross Street: H Street Parcel Number: 007-0015-018-0000
Property Owner: Bonfair Market Phone Number: 916-774-1100
Well Contractor: View Drilling, Inc. License Number: 720901 Type: C57
Contractor Address: PO Box 4116 Expiration Date: 4/30/08
City: Isteton Zip: 95641 Phone: 916-774-1100 Well/Boring Identification Number: MW-1

WORK TO BE PERFORMED: (License Required)

☐ Construct Well (C-57) ☐ Repair/Modify Well or Pump (C-57, C-61, Class A) ☐ Test Hole Soil Boring With Destruction (C-57)
☐ Install New Pump (C-57) ☒ Destroy Well (C-57) ☐ Inactivation Permit, (Owner Only)
Comments: Pressure Grout & Drill out top 5' ☐ Other (state): _____

DISTANCE TO NEAREST: Leach Field: _____ Leach Pit: _____ Septic Tank: _____ Sewer Line: _____
Stream, Ditch, Drainage Canal: _____ 100 Year Flood Plain: _____

INTENDED USE:

DRILLING METHOD:

CONSTRUCTION SPECIFICATIONS:

☐ Domestic/Private ☐ Auger BOREHOLE: Diameter: _____ Depth: _____ Gravel Pack: Yes ☐ No ☐
☐ Public Water System ☐ Cable Tool CASING: Diameter: _____ Depth: _____
☐ Irrigation ☐ Driven If Steel, Gauge: _____ Or Thickness: _____
☐ Cathodic Protection ☐ Rotary If Plastic, Type: _____ (MUST MEET ASTM F-480)
☐ Monitoring ☐ Other (state) If Conductor, Diameter: _____ Depth: _____
☐ Extraction/Recovery GROUT: Diameter: _____ Depth: _____ Sealing Material: _____
☐ Heat Exchanger TRANSITION SEAL: Material: _____ Interval: _____
☐ Other (state) Comments: _____

PUMP INSTALLATION/REPAIR:

Contractor: _____ License Number: _____
Type of Pump: _____ Horse Power: _____ License Type: _____ Expiration Date: _____

WELL/TEST HOLE/ SOIL BORING DESTRUCTION: Diameter: 2" Total depth: 32.20 Depth to Water: ~20 ft

I will comply with all Codes, Rules and Regulations of the State and County pertaining to or regulating well construction/destruction, call for a grout/destruction inspection at least 24 hours prior to placement of sealing material, notify the Department within 5 days of the completion of my work so a final inspection can be made, and obtain final approval before placing the well in service.

Signature: Karl Strong ☐ Property Owner ☒ Well Contractor
Print Name: Karl Strong ☐ Agent for Property Owner* ☒ Agent for Well Contractor*
Company: View Drilling, Inc. Phone: _____ Field Phone # if Available: _____
Mailing Address: PO Box 4116 Isteton City, State, Zip: CA 95641

A SITE PLAN MUST BE SUBMITTED WITH EACH APPLICATION
PERMIT EXPIRES ONE (1) YEAR FROM DATE ISSUED (UNLESS EXTENDED)

**WELL APPLICATION
AND PERMIT FORM**

FOR OFFICE USE ONLY

☐ DISAPPROVED ☒ APPROVED
☐ APPROVED WITH CONDITIONS (See attachment)
By: SBM Date: 4/26/06 Date Received: 4-26-06 Permit Number: 28712
Grout Inspection By: _____ Date: _____ Date Issued: _____ SR Number: _____
Actual Well Depth: _____ Actual Grout Depth: _____ Total Fee: \$76- Receipt Number: 153655
Depth to first Water: _____ GPS #: _____ Site Number: _____
Final Inspection By: _____ Date: _____
Well Destruction Inspection By: _____ Date: _____
Comments: _____

Inspecting Division: ☒ ENVIRONMENTAL HEALTH

☐ HAZARDOUS MATERIALS

SITE ADDRESS: 809 20th Street City: Sacramento Zip: 95814
Nearest Major Cross Street: H Street Parcel Number: 007-0015-018-0000
Property Owner: Bon Fair Market Phone Number: _____
Well Contractor: W&W Drilling, Inc License Number: 720904 Type: C57
Contractor Address: PO Box 416 Expiration Date: 4/30/08
City: Yuba Zip: 95604 Phone: 9167774100 Well/Boring Identification Number: MW2

WORK TO BE PERFORMED: (License Required)

☐ Construct Well (C-57) ☐ Repair/Modify Well or Pump (C-57, C-61, Class A) ☐ Test Hole Soil Boring With Destruction (C-57)
☐ Install New Pump (C-57) ☒ Destroy Well (C-57) ☐ Inactivation Permit, (Owner Only)
Comments: Pressuregrout & Drill out top 5' ☐ Other (state): _____

DISTANCE TO NEAREST: Leach Field: _____ Leach Pit: _____ Septic Tank: _____ Sewer Line: _____
Stream, Ditch, Drainage Canal: _____ 100 Year Flood Plain: _____

INTENDED USE:

DRILLING METHOD:

CONSTRUCTION SPECIFICATIONS:

☐ Domestic/Private ☐ Auger **BOREHOLE:** Diameter: _____ Depth: _____ Gravel Pack: Yes ☐ No ☐
☐ Public Water System ☐ Cable Tool **CASING:** Diameter: _____ Depth: _____
☐ Irrigation ☐ Driven If Steel, Gauge: _____ Or Thickness: _____
☐ Cathodic Protection ☐ Rotary If Plastic, Type: _____ (MUST MEET ASTM F-480)
☐ Monitoring ☐ Other (state) If Conductor, Diameter: _____ Depth: _____
☐ Extraction/Recovery **GROUT:** Diameter: _____ Depth: _____ Sealing Material: _____
☐ Heat Exchanger **TRANSITION SEAL:** Material: _____ Interval: _____
☐ Other (state) Comments: _____

PUMP INSTALLATION/REPAIR:

Contractor: _____ License Number: _____
Type of Pump: _____ Horse Power: _____ License Type: _____ Expiration Date: _____

WELL/TEST HOLE/ SOIL BORING DESTRUCTION: Diameter: 2" Total depth: 32.30 Depth to Water: 220 ft

I will comply with all Codes, Rules and Regulations of the State and County pertaining to or regulating well construction/destruction, call for a grout/destruction inspection at least 24 hours prior to placement of sealing material, notify the Department within 5 days of the completion of my work so a final inspection can be made, and obtain final approval before placing the well in service.

Signature: Karli Strong ☐ Property Owner ☒ Well Contractor
Print Name: Karli Strong ☐ Agent for Property Owner* ☐ Agent for Well Contractor* SBM
Company: W&W Drilling, Inc. Phone: _____ Field Phone # if Available: _____
Mailing Address: PO Box 416 City, State, Zip: Yuba CA 95604

**A SITE PLAN MUST BE SUBMITTED WITH EACH APPLICATION
PERMIT EXPIRES ONE (1) YEAR FROM DATE ISSUED (UNLESS EXTENDED)**

**WELL APPLICATION
AND PERMIT FORM**

FOR OFFICE USE ONLY

☐ DISAPPROVED

☒ APPROVED

Date Received: 4-26-06

Permit Number: 28713

☐ APPROVED WITH CONDITIONS (See attachment)

Date Issued: _____

SR Number: _____

By: John

Date: 4/26/06

Total Fee: \$78-

Receipt Number: 153655

Grout Inspection By: _____

Date: _____

GPS #: _____

Site Number: _____

Actual Well Depth: _____

Actual Grout Depth: _____

Final Inspection By: _____

Date: _____

Depth to first Water: _____

Well Destruction Inspection By: _____

Date: _____

Comments: _____

Inspecting Division: ☒ ENVIRONMENTAL HEALTH

☐ HAZARDOUS MATERIALS

SITE ADDRESS: 809 20th Street

City: Sacramento

Zip: 95814

Nearest Major Cross Street: H Street

Parcel Number: 007-0015-018-0000

Property Owner: Monfair Market

Phone Number: _____

Well Contractor: V&W Drilling, Inc

License Number: 120904

Type: C57

Contractor Address: PO BOX 416

Expiration Date: 4/30/08

City: Ishleton

Zip: 95641

Phone: 916 777 4100

Well/Boring Identification Number: MW-3

WORK TO BE PERFORMED: (License Required)

☐ Construct Well (C-57)

☐ Repair/Modify Well or Pump (C-57, C-61, Class A)

☐ Test Hole Soil Boring With Destruction (C-57)

☐ Install New Pump (C-57)

☒ Destroy Well (C-57)

☐ Inactivation Permit, (Owner Only)

Comments: Pressure grout & Drill out top 5'

☐ Other (state): _____

DISTANCE TO NEAREST:

Leach Field: _____

Leach Pit: _____

Septic Tank: _____

Sewer Line: _____

Stream, Ditch, Drainage Canal: _____

100 Year Flood Plain: _____

INTENDED USE:

DRILLING METHOD:

CONSTRUCTION SPECIFICATIONS:

☐ Domestic/Private

☐ Auger

BOREHOLE: Diameter: _____ Depth: _____

Gravel Pack: Yes ☐ No ☐

☐ Public Water System

☐ Cable Tool

CASING: Diameter: _____ Depth: _____

☐ Irrigation

☐ Driven

If Steel, Gauge: _____

Or Thickness: _____

☐ Cathodic Protection

☐ Rotary

If Plastic, Type: _____

(MUST MEET ASTM F-480)

☐ Monitoring

☐ Other (state) _____

If Conductor, Diameter: _____

Depth: _____

☐ Extraction/Recovery

GROUT: Diameter: _____

Depth: _____

Sealing Material: _____

☐ Heat Exchanger

TRANSITION SEAL:

Material: _____

Interval: _____

☐ Other (state) _____

Comments: _____

PUMP INSTALLATION/REPAIR:

Contractor: _____

License Number: _____

Type of Pump: _____

Horse Power: _____

License Type: _____

Expiration Date: _____

WELL/TEST HOLE/ SOIL BORING DESTRUCTION:

Diameter: 2"

Total depth: 31.49'

Depth to Water: 20 ft

I will comply with all Codes, Rules and Regulations of the State and County pertaining to or regulating well construction/destruction, call for a grout/destruction inspection at least 24 hours prior to placement of sealing material, notify the Department within 5 days of the completion of my work so a final inspection can be made, and obtain final approval before placing the well in service.

Signature: Karlo Stroding

☐ Property Owner

☒ Well Contractor

Print Name: Karlo Stroding

☐ Agent for Property Owner*

☐ Agent for Well Contractor* John

Company: V&W Drilling

Phone: 916 777 4100

Field Phone # if Available: _____

Mailing Address: PO BOX 416

City, State, Zip: Ishleton, CA 95641

**A SITE PLAN MUST BE SUBMITTED WITH EACH APPLICATION
PERMIT EXPIRES ONE (1) YEAR FROM DATE ISSUED (UNLESS EXTENDED)**

WELL APPLICATION
AND PERMIT FORM

FOR OFFICE USE ONLY

☐ DISAPPROVED ☒ APPROVED
☐ APPROVED WITH CONDITIONS (See attachment)
By: EBN Date: 4/26/06 Date Received: 4-26-06 Permit Number: 28714
Grout Inspection By: _____ Date: _____ Date Issued: _____ SR Number: _____
Actual Well Depth: _____ Actual Grout Depth: _____ Total Fee: \$76- Receipt Number: 153655
Depth to first Water: _____ GPS #: _____ Site Number: _____
Well Destruction Inspection By: _____ Date: _____
Comments: _____

Inspecting Division: ☒ ENVIRONMENTAL HEALTH

SITE ADDRESS: 809 20th Street City: Sacramento Zip: 95814
Nearest Major Cross Street: H Street Parcel Number: 007-0015-018-0000
Property Owner: Bon Fair Market Phone Number: OK
Well Contractor: V&W Drilling, Inc License Number: 720904 Type: C57
Contractor Address: PO BOX 4116 Expiration Date: 4/30/08
City: Yuba Zip: 95641 Phone: 916-777-4100 Well/Boring Identification Number: MD-4

WORK TO BE PERFORMED: (License Required)

☐ Construct Well (C-57) ☐ Repair/Modify Well or Pump (C-57, C-61, Class A) ☐ Test Hole Soil Boring With Destruction (C-57)
☐ Install New Pump (C-57) ☒ Destroy Well (C-57) ☐ Inactivation Permit, (Owner Only)
Comments: Pressuregrout Drillout top 5' ☐ Other (state): _____

DISTANCE TO NEAREST: Leach Field: _____ Leach Pit: _____ Septic Tank: _____ Sewer Line: _____
Stream, Ditch, Drainage Canal: _____ 100 Year Flood Plain: _____

INTENDED USE:

☐ Domestic/Private
☐ Public Water System
☐ Irrigation
☐ Cathodic Protection
☐ Monitoring
☐ Extraction/Recovery
☐ Heat Exchanger
☐ Other (state) _____

DRILLING METHOD:

☐ Auger
☐ Cable Tool
☐ Driven
☐ Rotary
☐ Other (state) _____

CONSTRUCTION SPECIFICATIONS:

BOREHOLE: Diameter: _____ Depth: _____ Gravel Pack: Yes ☐ No ☐
CASING: Diameter: _____ Depth: _____
If Steel, Gauge: _____ Or Thickness: _____
If Plastic, Type: _____ (MUST MEET ASTM F-480)
If Conductor, Diameter: _____ Depth: _____
GROUT: Diameter: _____ Depth: _____ Sealing Material: _____
TRANSITION SEAL: Material: _____ Interval: _____

PUMP INSTALLATION/REPAIR:

Contractor: _____ License Number: _____
Type of Pump: _____ Horse Power: _____ License Type: _____ Expiration Date: _____

WELL/TEST HOLE/ SOIL BORING DESTRUCTION: Diameter: 2" Total depth: 30.52' Depth to Water: 16 ft

I will comply with all Codes, Rules and Regulations of the State and County pertaining to or regulating well construction/destruction, call for a grout/destruction inspection at least 24 hours prior to placement of sealing material, notify the Department within 5 days of the completion of my work so a final inspection can be made, and obtain final approval before placing the well in service.

Signature: Karli Stroing ☐ Property Owner ☒ Well Contractor
Print Name: Karli Stroing ☐ Agent for Property Owner* ☐ Agent for Well Contractor* EBN
Company: V&W Drilling, Inc Phone: 916-777-4100 Field Phone # if Available: _____
Mailing Address: PO BOX 4116 City, State, Zip: Yuba CA 95641

WELL APPLICATION
AND PERMIT FORM

FOR OFFICE USE ONLY

☐ DISAPPROVED

☒ APPROVED

☐ APPROVED WITH CONDITIONS (See attachment)

Date Received: 4-26-06

Permit Number: 28715

Date Issued:

SR Number:

By: SWN Date: 4/26/06

Total Fee: \$74-

Receipt Number: 153655

Grout Inspection By:

Date:

GPS #:

Site Number:

Actual Well Depth:

Actual Grout Depth:

Final Inspection By:

Date:

Depth to first Water:

Well Destruction Inspection By:

Date:

Comments:

Inspecting Division: ☒ ENVIRONMENTAL HEALTH

☐ HAZARDOUS MATERIALS

SITE ADDRESS: 809 204th Street

City: Sacramento

Zip: 95641

Nearest Major Cross Street: H Street

Parcel Number: 007-0015-018-0000

Property Owner: Bonfair Markets

Phone Number:

Well Contractor: VAW Drilling, Inc.

License Number: 720904

Type: C57

Contractor Address: PO Box 416

Expiration Date: 4/30/08

City: Yuba

Zip: 95641

Phone: 916774100

Well/Boring Identification Number: MW 5

WORK TO BE PERFORMED: (License Required)

☐ Construct Well (C-57)

☐ Repair/Modify Well or Pump (C-57, C-61, Class A)

☐ Test Hole Soil Boring With Destruction (C-57)

☐ Install New Pump (C-57)

☒ Destroy Well (C-57)

☐ Inactivation Permit, (Owner Only)

Comments: Pressure grout & Drill out top 5'

☐ Other (state):

DISTANCE TO NEAREST:

Leach Field:

Leach Pit:

Septic Tank:

Sewer Line:

Stream, Ditch, Drainage Canal:

100 Year Flood Plain:

INTENDED USE:

☐ Domestic/Private

☐ Public Water System

☐ Irrigation

☐ Cathodic Protection

☐ Monitoring

☐ Extraction/Recovery

☐ Heat Exchanger

☐ Other (state)

Comments:

DRILLING METHOD:

☐ Auger

☐ Cable Tool

☐ Driven

☐ Rotary

☐ Other (state)

CONSTRUCTION SPECIFICATIONS:

BOREHOLE: Diameter:

Depth:

Gravel Pack:

Yes ☐

No ☐

CASING: Diameter:

Depth:

If Steel, Gauge:

Or Thickness:

If Plastic, Type:

(MUST MEET ASTM F-480)

If Conductor, Diameter:

Depth:

GROUT: Diameter:

Depth:

Sealing Material:

TRANSITION SEAL:

Material:

Interval:

PUMP INSTALLATION/REPAIR:

Contractor:

License Number:

Type of Pump:

Horse Power:

License Type:

Expiration Date:

WELL/TEST HOLE/ SOIL BORING DESTRUCTION:

Diameter: 2"

Total depth: 28'

Depth to Water: 216 ft.

I will comply with all Codes, Rules and Regulations of the State and County pertaining to or regulating well construction/destruction, call for a grout/destruction inspection at least 24 hours prior to placement of sealing material, notify the Department within 5 days of the completion of my work so a final inspection can be made, and obtain final approval before placing the well in service.

Signature: Karli Stroing

☐ Property Owner

☒ Well Contractor

Print Name: Karli Stroing

☐ Agent for Property Owner*

☐ Agent for Well Contractor*

Company: VAW Drilling, Inc.

Phone: 916774100

Field Phone # if Available:

Mailing Address: PO Box 416

City, State, Zip: Yuba CA 95641

A SITE PLAN MUST BE SUBMITTED WITH EACH APPLICATION
PERMIT EXPIRES ONE (1) YEAR FROM DATE ISSUED (UNLESS EXTENDED)

WELL APPLICATION
AND PERMIT FORM

FOR OFFICE USE ONLY

☐ DISAPPROVED ☒ APPROVED
☐ APPROVED WITH CONDITIONS (See attachment)
By: SVN Date: 4/26/06 Date Received: 4-23-06 Permit Number: 28716-28717
Grout Inspection By: _____ Date: _____ Date Issued: _____ SR Number: _____
Actual Well Depth: _____ Actual Grout Depth: _____ Total Fee: \$746 Receipt Number: 153655
Depth to first Water: _____ GPS #: _____ Site Number: _____
Well Destruction Inspection By: _____ Date: _____
Comments: _____

Inspecting Division: ☒ ENVIRONMENTAL HEALTH

☐ HAZARDOUS MATERIALS

SITE ADDRESS: 809 20th Street City: Sacramento Zip: 95641
Nearest Major Cross Street: H Street Parcel Number: 007-0015-018-0000
Property Owner: Mon Fair Markets Phone Number: OK
Well Contractor: V&W Drilling, Inc. License Number: 720904 Type: C57
Contractor Address: PO Box 418 Expiration Date: 4/30/08
City: Yuba Zip: 95641 Phone: 916 777-4100 Well/Boring Identification Number: MW 6 & MW 7

WORK TO BE PERFORMED: (License Required)

☐ Construct Well (C-57) ☐ Repair/Modify Well or Pump (C-57, C-61, Class A) ☐ Test Hole Soil Boring With Destruction (C-57)
☐ Install New Pump (C-57) ☒ Destroy Well (C-57) ☐ Inactivation Permit, (Owner Only)
Comments: Pressure grout & drill out top 5' ☐ Other (state): _____

DISTANCE TO NEAREST: Leach Field: _____ Leach Pit: _____ Septic Tank: _____ Sewer Line: _____
Stream, Ditch, Drainage Canal: _____ 100 Year Flood Plain: _____

INTENDED USE:

DRILLING METHOD:

CONSTRUCTION SPECIFICATIONS:

☐ Domestic/Private ☐ Auger BOREHOLE: Diameter: _____ Depth: _____ Gravel Pack: Yes ☐ No ☐
☐ Public Water System ☐ Cable Tool CASING: Diameter: _____ Depth: _____
☐ Irrigation ☐ Driven If Steel, Gauge: _____ Or Thickness: _____
☐ Cathodic Protection ☐ Rotary If Plastic, Type: _____ (MUST MEET ASTM F-480)
☐ Monitoring ☐ Other (state) If Conductor, Diameter: _____ Depth: _____
☐ Extraction/Recovery GROUT: Diameter: _____ Depth: _____ Sealing Material: _____
☐ Heat Exchanger TRANSITION SEAL: Material: _____ Interval: _____
☐ Other (state) Comments: _____

PUMP INSTALLATION/REPAIR:

Contractor: _____ License Number: OK
Type of Pump: _____ Horse Power: _____ License Type: _____ Expiration Date: _____

WELL/TEST HOLE/ SOIL BORING DESTRUCTION:

Diameter: 2" Total depth: 28.95' Depth to Water: 216 ft

I will comply with all Codes, Rules and Regulations of the State and County pertaining to or regulating well construction/destruction, call for a grout/destruction inspection at least 24 hours prior to placement of sealing material, notify the Department within 5 days of the completion of my work so a final inspection can be made, and obtain final approval before placing the well in service.

Signature: Karli R Strain ☐ Property Owner ☒ Well Contractor
Print Name: Karli R Strain ☐ Agent for Property Owner* ☐ Agent for Well Contractor* SVN
Company: V&W Drilling, Inc. Phone: _____ Field Phone # if Available: _____
Mailing Address: PO Box 418 City, State, Zip: Yuba, CA 95641

CITY OF SACRAMENTO PUBLIC WORKS DEPARTMENT

ENCROACHMENT/EXCAVATION PERMIT

Contractor

PERMIT NUMBER

2006474

APPLICANT: V & W Drilling, Inc PHONE: (916) 777-4100ADDRESS: 100 5th StreetIsleton, CA 95641

Application is hereby made for Encroachment/Excavation Permit to perform the following:

1. Applicant's work order or job number: _____

2. Location or work: 809 20th Street

3. General description of work to be done:

(a) Excavations: 0 0 0
Width Depth Length Surface Material(b) Conduit: _____ 0 _____
Type: (PVC, Metal, etc.) Diameter: Conveying: (Water, Gas, etc)(c) Other: Remove Moitoring well #6 & 7 on planter
(Sidewalk, Sign, Driveway, etc.)4. Estimated: Start Date 6/1/2006 Days for Completion 1

5. Person familiar with details:

Name: Karli Stroing Phone No: (916) 777-4100

6. Applicants Inspector, Contractor, Foreman or Supervisor as appropriate:

Name: Frank Rameriz Phone No.: (209) 329-7747**Note: See General Conditions (attached). See "Special Provisions" below. Call Enchroment-Streetuse Permit Help Desk 808-6810 one week prior to starting work.**DATE: 5/24/2006

FILE NUMBER

D06-195

CIP Number:

PERMIT DATE

COMPLETION DATE

Engineering

Const Inspection

Traffic

Elect

Days

Trench Cut Fee: \$

Ordinance #83070

INSPECTOR

DAVIS

(916) 826-3413

"SPECIAL PROVISIONS"

Copy of USA ticket required. All USA markings shall be removed upon completion of project.

Traffic Control Plan must be submitted and approved prior to the start of work. The Traffic Control Plan is required to be on site with this permit at all times. Failure to comply will result in a Fine.



P. O. Box 2165 ■ Livermore, California 94551-2165 ■ (925) 373-9211

ATTACHMENT B

CA DWR Form 188 FOR WELL DESTRUCTIONS

GEOLOGIC LOG

WELL OWNER

Name The Customer Company
Mailing Address P.O. Box 2400
Sacramento CA 95810
CITY STATE ZIP
Address Box 2000 St WELL LOCATION
City Sacramento
County Sacramento
APN Book 007 Page 0015 Parcel 01B-0000
Township _____ Range _____ Section _____
Lat _____ N Long _____ W
DEG. MIN. SEC. DEG. MIN. SEC.

LOCATION SKETCH

- ACTIVITY (\preceq)

See
Attached
Map

☐ NEW WELL
 MODIFICATION/REPAIR
 ☐ Deepen
 ☐ Other (Specify) _____

☒ DESTROY (Describe Procedures and Materials Under "GEOLOGIC LOG")

USES (\leq)

WATER SUPPLY _____
 _____ Domestic _____ Public
 _____ Irrigation _____ Industrial

MONITORING _____
 TEST WELL _____

CATHODIC PROTECTION _____
 HEAT EXCHANGE _____
 DIRECT PUSH _____
 INJECTION _____
 VAPOR EXTRACTION _____
 SPARGING _____
 REMEDIATION _____
 OTHER (SPECIFY) _____

WATER LEVEL & YIELD OF COMPLETED WELL

DEPTH TO FIRST WATER _____ (Ft.) BELOW SURFACE
DEPTH OF STATIC WATER LEVEL _____ (Ft.) & DATE MEASURED _____
ESTIMATED YIELD * _____ (GPM) & TEST TYPE _____
TEST LENGTH _____ (Hrs.) TOTAL DRAWDOWN _____ (Ft.)
* May not be representative of a well's long-term yield.

[illegible][illegible]

ATTACHMENTS (ㄹ)

- ATTACH ADDITIONAL INFORMATION, IF IT EXISTS.

CERTIFICATION STATEMENT

I, the undersigned, certify that this report is complete and accurate to the best of my knowledge and belief.

NAME VAW Dilling
(PERSON, FIRM, OR CORPORATION) (TYPED OR PRINTED)
ADDRESS P.O. Box 416 CITY Isleton STATE CA ZIP 95641
Signed [Signature] DATE SIGNED 6-7-06 C-57 LICENSE NUMBER 720904
C-57 LICENSED WATER WELL CONTRACTOR

